# Financing Mental Health Initiatives for Those Who Have Deployed

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#### **Overview**

- The cost of health care
- Care during peace time
- Calculating the cost of care during a war
  - Contingency Operations Support Tool (C.O.S.T) Model
- Post Deployment Health Re-Assessment (PDHRA)
- Summary



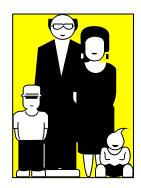
#### FY 2006 Snapshot

\$34.7 billion Total Budget Authority





70 Inpatient **Facilities** 



9.2 million Beneficiaries

Over 133 thousand military and civilian medical personnel





1,085 Medical, Dental & Veterinary Clinics



#### **Care During Peace Time**

- Care of active duty paid for by host base Medical Treatment Facility (MTF)
- Care of Guard/Reserve paid for through the Line of Duty (LOD) process
- Military Health System funded via the Defense Health Program
- There is not a specific line item in the President's budget for mental health care



# Calculating The Cost Of Medical Care During A War

- Contingency Operations Support Tool (C.O.S.T.)
   Model
  - Used by all Services and Agencies within DoD
  - Based on an average cost basis, i.e. an average cost is applied to each individual who deploys
  - An average cost for mental health care has been calculated for Active Duty and Reserve Component (RC) Personnel



# Background Why C.O.S.T.

- Portions of Defense Health Program (DHP) costs historically rolled up into Service Line costs in the COST model
- Potential existed for Service Lines not to fully reimburse DHP for appropriate costs due to lack of visibility of DHP in COST
- OMB/OUSD(C) asked DHP to break out costs separately from the Services in the COST model



# C.O.S.T. Approach

 Establish separate Cost Breakdown Structure elements for DHP

Update/determine cost factors unique to DHP

Modify COST Reports to include DHP



# Why Post Deployment Health Re-Assessment (PDHRA)?

- Expands deployment-related healthcare continuum
  - Pre and Post-Deployment Health Assessments
  - Post-Deployment Health Clinical Practice Guideline
  - Periodic Health Assessment (PHA)
- Deployment-related health concerns emerge and are reported over time
- Provide a global health assessment for early identification and intervention – systems approach
- Demonstrate caring posture to those who serve through targeted outreach procedures
- Remove barriers to care, de-stigmatize care-seeking at all levels



### PDHRA Mission & Intent What is the intent?

- Reach out to identify, educate, and provide access to care for ALL service members with deployment-related health concerns that emerge subsequent to return from operational deployments.
- Reach out and touch each individual = targeted outreach, positive message of understanding, caring, respect, appreciation NOT a message of disposal, elimination or pathologizing
- Identify = early identification and early intervention using a global health assessment with those who may not make timely presentation to regular healthcare system because of access or knowledge
- Educate = targeted health risk communication and education -- Targeted, Timely, Respected HCP source
- Access to care = remove barriers to care associated with myths, misunderstandings, complexity of healthcare and community support benefits; increase knowledge of resources for pre-clinical and preventive stress management
- NOT a duplicate of the CCEP Program
  - Public health, systems focus...it's not your traditional medical model



# PDHRA Program Elements The Steps

#### **Program Elements**

- 1. Outreach, identification, and notification Awareness
- 2. Education and Training *Individuals, Leaders, Clinicians*
- 3. Screening and Assessment Form plus PCP review
- 4. Evaluation and Treatment Via referral
- 5. Follow-up and case management Check up on barriers
- 6. Quality assurance and program evaluation *Central FY06*



### PDHRA Process Elements How does it work?

#### **Process**

- Complete standardized electronic assessment instrument
- Review health concerns with a health care provider
- Receive health risk communication and education about concerns, potential signs and symptoms to watch in the future
- Refer to appropriate level of care for evaluation and treatment
- Remote, geographically separated contacted by phone
- Consistent standard of care delivered to all components



### PDHRA Target Population Who is it intended for?

- All service members affected by deployments associated with the GWOT
- Confirms Post Deployment Health Assessment (PDHA) population
  - All who deployed 30+ days to location not serviced by fixed military treatment facility
  - High tempo for all groups
- Phased approach
  - Return from deployment Oct 05 onward
  - Returned from deployment in year before program initiation (Mar 04-Sep 05)
  - All others since Sept 11, 2001 will be offered participation opportunity
    - Notice will be sent to pre-backlog members; expect 10% response rate to complete the PDHRA

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#### **Preliminary Feedback**

What are some of the preliminary responses?

- Overwhelming positive reception
- Candid reporting of symptoms
- In first National Guard assessment event
  - Identified one suicidal and one homicidal tendency— successful intervention
- Service members sincerely appreciate proactive approach
- Identified gaps in system in need of fix



#### **Information Sharing**

- A solid working partnership has been developed between DoD and VA
- A Concept of Operations (CONOPS) for information sharing has been developed using the Federal Health Information Exchange
- Costs are currently being developed for implementation of the CONOPS
- Anticipated usable information flow is expected for July 2006



# PDHRA Referral Assumptions

- Active Duty seen within the DHP system
- RC members offered choice of care from benefits
  - Pre-clinical referrals to OneSource, non-medical care, no additional costs involved
  - TAMP for 6 months
  - Option for DHP care under LOD process to provide steadfast military focus on readiness and retention



#### **Summary**

- Peace and war time care always paid for
- Have a model that predicts the cost of mental health care during a war (C.O.S.T.)
- We have a tool and process to identify those in need of help
- We have a partner to help care for those who need help